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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF **CORRESPONDENCE ADDRESS**

Application Number	09/874,395			
Filing Date	June 4, 2001			
First Named Inventor	James W. Jones			
Group Art Unit	2662			
Examiner Name	Mered			
Patent No.:	7,068,672			
Issue Date:	06/27/2007			
Attorney Docket No.	CLX021 US			

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450							
Please withdraw me as attorney or agent for the above-identified patent application, and							
☐ all the attorneys/agents of record ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or ☐ the attorneys/agents associated with Customer Number34036							
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.							
The reasons for this request are:							
The application has now issued as a patent, and our firm's work is completed							
CORRESPONDENCE ADDRESS							
 The correspondence address is NOT affected by this withdrawal. Change the correspondence address, the fee address, and direct all future correspondence to: The address associated with Customer Number: 							
Firm or Individual Name	Calix Networks, Inc., Attn: Denis Quinlan, Esq.						
Address .	1035 N. McDowell Blvd.						
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Signature	S. Comba						
Name	Omkar K. Suryadevara		Registration No. 36,320				
Date CERTIFICATE OF MAILING I hereby certify that this correspondence is being facsimile transmitted to the U.S. Patent and Trademark Office to fax number 571-279-8300 on the date shown below: Attorney for Applicant(s) Date Telephone No. (408) 378-7777 ext Telephone No. (408) 378-7777 ext Date							

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval or withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.